

Datapoint

Information from the Division of Health Care Finance and Policy
Massachusetts Acute Care Hospital Inpatient Discharges
Q2 FY01 (01/01/01–03/31/01) versus Q2 FY02 (01/01/02–03/31/02)

Jane Swift
Governor

Robert P. Gittens
Secretary
Executive Office of
Health & Human Services

Division of Health Care
Finance and Policy

Two Boylston Street
Boston, MA 02116
(617) 988-3100
www.mass.gov/dhcfp

Linda Ruthardt
Commissioner

Number 9
Q2 FY01 and Q2 FY02

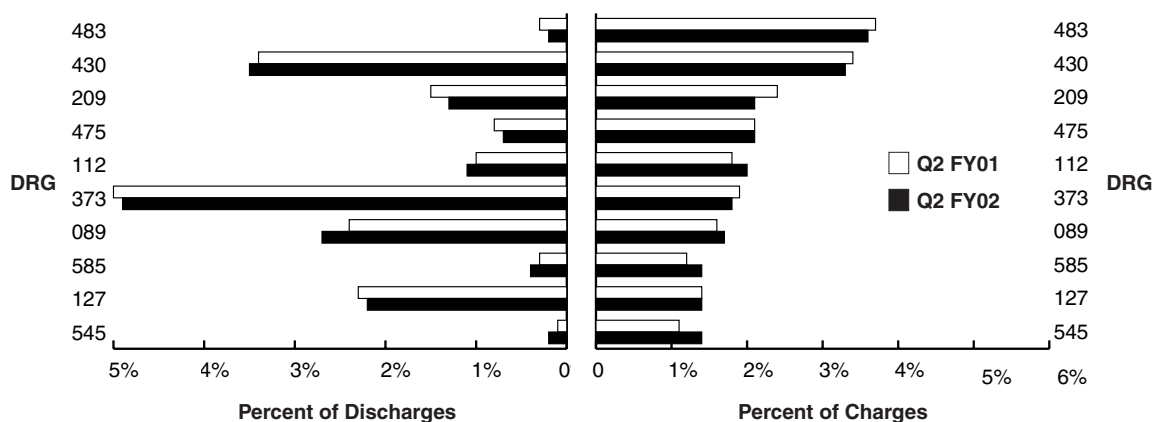
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Division of Health Care
Finance and Policy

This issue compares two quarters
of data (Q2 FY01 and Q2 FY02).
Look for the data behind
Datapoint on the DHCFP web site.

What is *Datapoint*?

Datapoint is a quarterly
publication that highlights the
most current information available
about the Massachusetts short stay
acute care hospital industry. To
obtain additional copies, please
call the Division of Health Care
Finance and Policy Office of
Communications at (617) 988-3125.
To share your comments and
suggestions for future editions,
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(617) 988-3144 or by email at
ben.locke@state.ma.us.

Top Ten DRGs Ranked by Percent of Charges



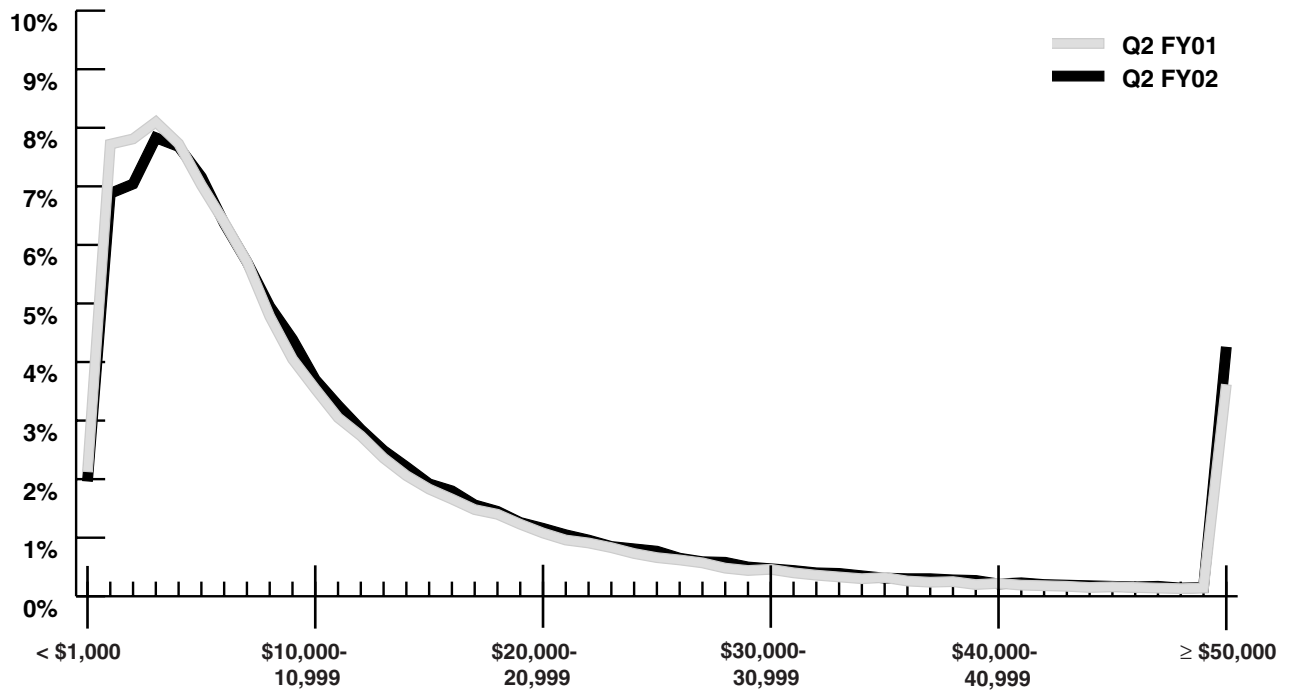
Note: See table below for DRG labels. DRGs are based on the 3M All-Patient Grouper, version 12, and ranked according to percent of total charges for Q2 FY02.

Mean Charges per Discharge and Length of Stay for Top Ten DRGs

DRG	Mean Charges per Discharge		Mean LOS	
	Q2 FY01	Q2 FY02	Q2 FY01	Q2 FY02
483: Tracheostomy except for face, mouth and neck diagnoses	\$198,180	\$215,687	41.6	41.1
430: Psychoses	\$13,091	\$13,911	10.9	10.7
209: Major joint and limb reattachment procedure of lower extremities	\$21,405	\$23,339	4.3	4.2
475: Respiratory system diagnosis with ventilator support	\$37,303	\$41,245	11.6	11.6
112: Percutaneous cardiovascular procedure without AMI	\$23,081	\$26,161	2.0	1.9
373: Vaginal delivery without complications	\$4,904	\$5,404	2.2	2.2
089: Simple Pneumonia & Pleurisy age >17 w CC	\$8,815	\$9,157	5.2	5.1
585: Major stomach, esophageal, duodenal, small and large bowel procedure with major CC	\$50,637	\$60,393	15.4	16.9
127: Heart failure and shock	\$8,176	\$9,068	4.5	4.5
545: Cardiac valve procedure with major CC	\$112,699	\$139,825	14.4	16.0

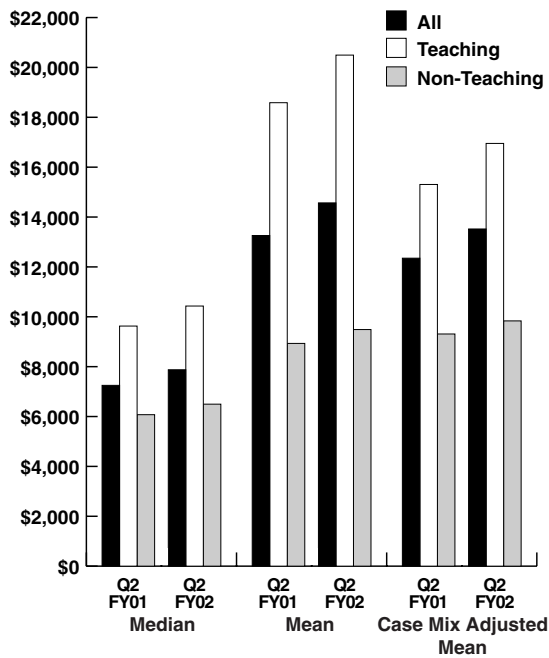
Note: AMI = acute myocardial infarction, CC = complications or comorbidities

Distribution of Total Charges per Discharge

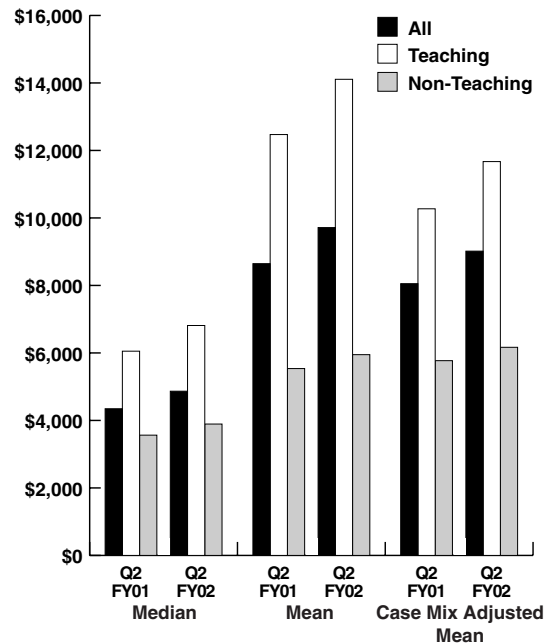


Note: Lines represent percent of discharges in each \$1,000 charge interval.

Total Charges per Discharge

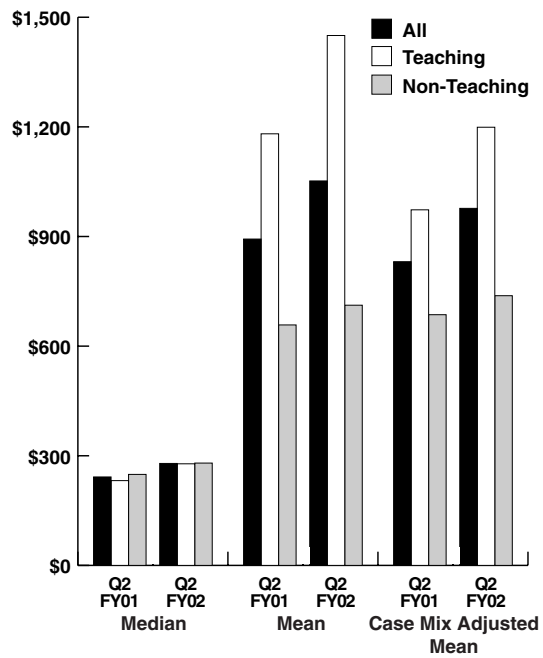


Ancillary Charges per Discharge

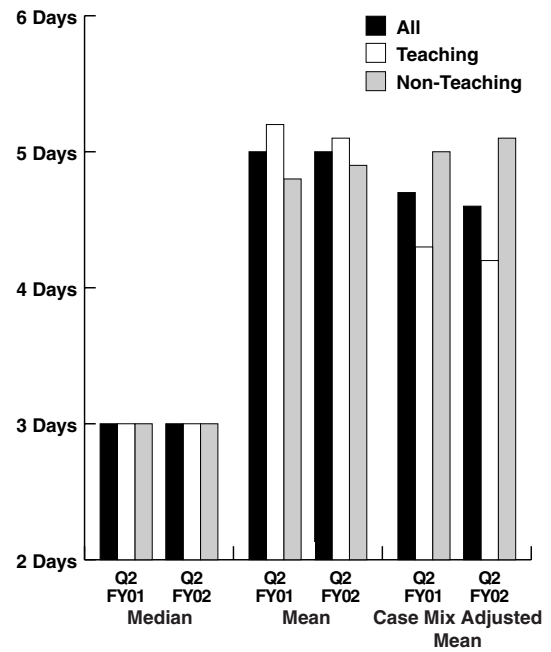


Note: Ancillary charges include all charges except those for routine and special accommodations.

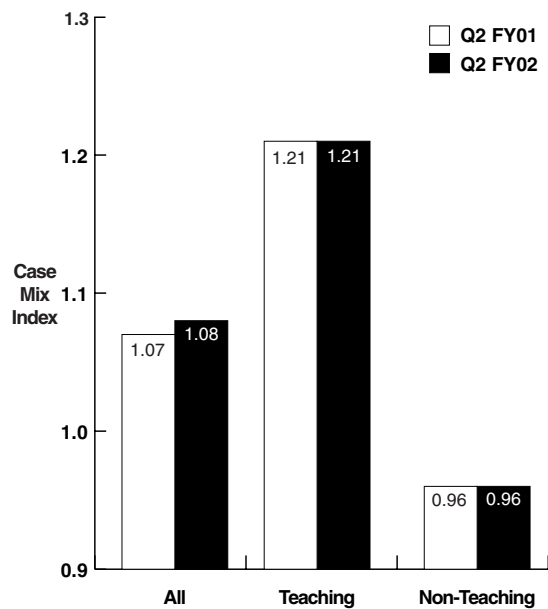
Pharmacy Charges per Discharge



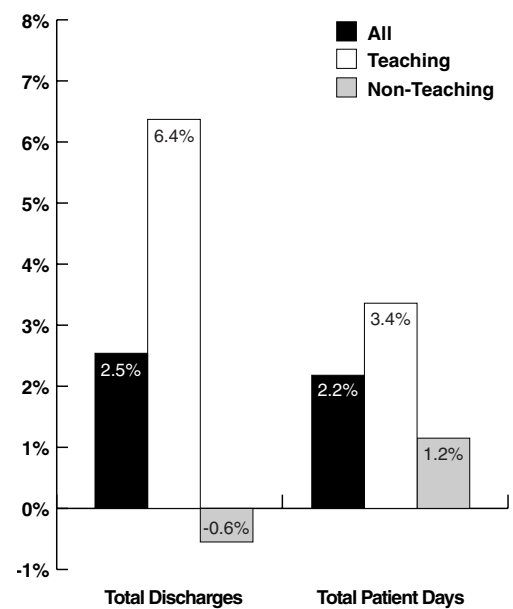
Length of Stay



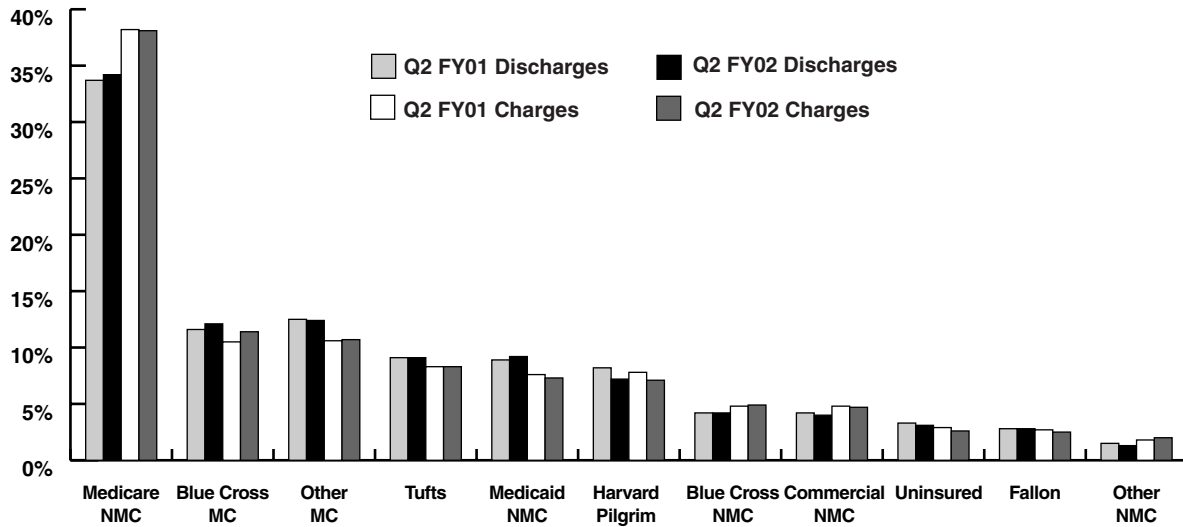
Case Mix Index



Percent Change in Discharges and Days (Q2 FY01 to Q2 FY02)

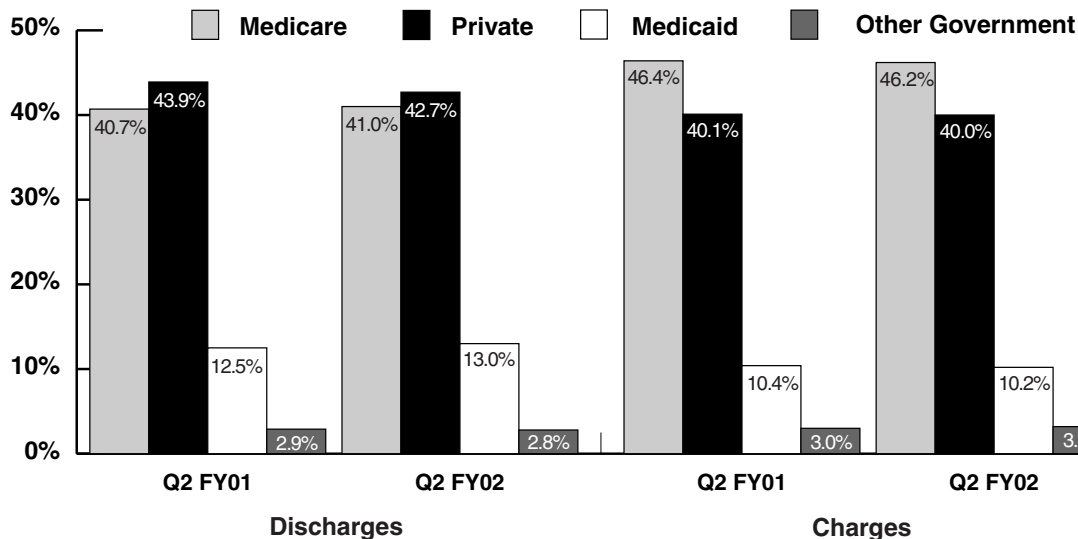


Payer Categories by Percent of Discharges and Charges



Note: Ranked by percent of total charges statewide Q2 FY02. MC = managed care. NMC = non-managed care. "Other MC" includes Health New England, US Healthcare, Medicaid primary care clinician, Massachusetts Behavioral Health Partnership, other HMOs, PPOs, and POSs. "Other NMC" includes: Workers' Compensation and other government payment.

Government and Private Payers by Percent of Discharges and Charges



Staff for this publication:

Michelle Anderson
Bennett Locke
Joanne Moylan
Heather Shannon

Note: "Other Government" includes workers' compensation and other government payment.

Endnotes

Statistics for the second quarter of FY02 (01/01/02 to 03/31/02) are based on short stay acute hospital inpatient discharge data received as of 8/14/02; some data that failed DHCfp edits have been included. Data from 70 hospitals are included in this edition of *Datapoint*. This includes data from 16 teaching hospitals and 54 non-teaching hospitals. The underlying statistics used to create the *Datapoint* graphics are available on our web site: www.mass.gov/dhcfp.

The following hospitals are categorized as teaching hospitals: Baystate Health Systems, Berkshire, Beth Israel Deaconess, Boston Medical Center, Brigham and Women's, Cambridge, Carney, Children's Medical Center, Dana Farber, Faulkner, Lahey Clinic, Mass. Eye and Ear, Mass. General, Mount Auburn, New England Medical Center, St. Elizabeth's, Saint Vincent, UMass/Memorial Medical Center.

Charges are not inflation-adjusted and do not represent costs or payments.

Case mix index is calculated using Massachusetts cost weights (base year = FY93) for the 3M All-Patient Grouper, version 12.